

## CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) BAVARO, DARREN MICHAEL		2. DEPARTMENT, COMPONENT AND BRANCH NAVY-USN		3. SOCIAL SECURITY NO. [REDACTED]	
4.a. GRADE, RATE OR RANK AEAA	4.b. PAY GRADE E2	5. DATE OF BIRTH (YYMMDD) [REDACTED]		6. RESERVE OBLIG. TERM. DATE Year N/A Month N/A Day N/A	

7.a. PLACE OF ENTRY INTO ACTIVE DUTY NEW YORK, NY	7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) [REDACTED] NJ
--	--

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND NAVAL AIR STATION WHIDBEY ISLAND WA	8.b. STATION WHERE SEPARATED PERSUPDET WHIDBEY ISLAND WA
--	---

9. COMMAND TO WHICH TRANSFERRED N/A	10. SGLI COVER Amount: \$ [REDACTED]
--	---

11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)  AE-0000/0000 X X X X X X X X X X X X X X	12. RECORD OF SERVICE			
	a. Date Entered AD This Period	96	DEC	10
	b. Separation Date This Period	98	NOV	02
	c. Net Active Service This Period	01	10	23
	d. Total Prior Active Service	00	00	00
	e. Total Prior Inactive Service	00	00	00
	f. Foreign Service	00	00	00
	g. Sea Service	00	00	26
	h. Effective Date of Pay Grade	97	SEP	16

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) NONE. X X X X X X X X X			
---	--	--	--

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) JOBS STRAND, 8 WKS, 97 FEB; AE "A1" SCHOOL, 18 WKS, 97SEP; EA-6B E&I 701H, 2 WKS, 97DEC; A6/EA6 ELEC CON 456N, 2 WKS, 97DEC. X X X X X X			
---	--	--	--

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM	Yes No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	Yes No	16. DAYS ACCRUED LEAVE PAID
[REDACTED]		[REDACTED]		[REDACTED]

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION [REDACTED]

18. REMARKS THE INFORMATION CONTAINED HEREIN IS SUBJECT TO COMPUTER MATCHING WITHIN THE DEPARTMENT OF DEFENSE OR WITH OTHER AFFECTED FEDERAL OR NON-FEDERAL AGENCY FOR VERIFICATION PURPOSES AND TO DETERMINE ELIGIBILITY FOR, AND/OR CONTINUED COMPLIANCE WITH, THE REQUIREMENTS OF A FEDERAL BENEFIT PROGRAM. X			
--	--	--	--

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) [REDACTED]	19.b. NEAREST RELATIVE (Name and address - include Zip Code) [REDACTED]
---	--

20. MEMBER REQUESTS COPY 6 BE SENT TO [REDACTED]	DIR. OF VET AFFAIRS [REDACTED]	21. MEMBER REQUESTS COPY 2 BE SENT TO [REDACTED]
---	-----------------------------------	---

## SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION DISCHARGED	24. CHARACTER OF SERVICE (Include upgrades) [REDACTED]		
25. SEPARATION AUTHORITY [REDACTED]	26. SEPARATION CODE [REDACTED]	27. REENTRY CODE [REDACTED]	
28. NARRATIVE REASON FOR SEPARATION [REDACTED]			
29. DATES OF TIME LOST DURING THIS PERIOD [REDACTED]			30. [REDACTED] COPY 4 Initials